Event Details

 PeopleSoft Strategic Sourcing

 Event ID
 Format
 Type
 Page

 34301-0000011389
 Sel1
 RFx
 1

 Event Round
 Version
 1
 1

 Event Name
 Pass-Through Autoclave
 Pass-Through Autoclave

Finish Time

02/17/2020 14:00:00 CST

Event Currency: US Dollar Bids allowed in other currency: No

Bidder: PUBLIC EVENT DETAILS

Submit To: Health

Contact:

Phone:

Email:

Call for Shipping Information

United States Tara Roark 615/532-1837

Tara.Roark@tn.gov

Event Description

01/30/2020 08:00:00 CST

Start Time

To establish a one-time purchase of a pass-through Autoclave. This Autoclave is solely used for sterilization purposes in the Bioterrorism BSL-3 Laboratory to meet obligations of the Center for Disease Control (CDC).

Specifications and terms & conditions are attached.

Procurement Contact: Tara.Roark@tn.gov 615-532-1837

READ THE ENTIRE BID, including the Event Details, Specifications, and Terms and Conditions and any other attachments.

If the Review and bid on this event link included in the e-mail notification does not work, please go to https://sso.edison.tn.gov/psp/paprd/SUPPLIER/SUPP/h/?tab=PAPP_GUEST Log in with your vendor ID and password in order to search bid opportunities.

NOTE: Need help with EDISON? Call the Edison HELP Desk at 866-376-0104 or 615-741-4357

Please do not wait until the last day to POST YOUR BID. The Edison system will sign you out after 30 minutes of inactivity. Your password expires EVERY 90 DAYS. It is the responsibility of the Edison User (bidder/vendor) to maintain their own profile information (Email address, phone numbers, address or contacts) and to continue to keep it current by logging into the Supplier Portal and making changes as needed.

Supplier Portal link: https://sso.edison.tn.gov/oaam_server/oamLoginPage.jsp (Maintain supplier information)

Central Procurement Office Website:

http://www.tn.gov/generalservices/section/central-procurement-office

The website is constantly being updated with information to assist the agencies and vendors; you are encouraged to visit the website frequently.

General Comments

- To establish a one time purchase of a pass-through autoclave for the Department of Health.

General Questions

Question UOM Best Worst Response
I (we) agree to strictly abide by all the statutes and

terms contained in the rules of the Department of General Services, Central Procurement Office, which are by reference made a part hereof, in addition to the special terms, conditions and specifications embodied in the invitation to bid.

IMPORTANT: By Selecting YES, the bidder certifies compliance with the above and further certifies that this bid is made without collusion or fraud.

Required: Yes Mandatory Response:Yes

Yes

Event ID	Format Type	Page	Bidder:	PUBLIC EVENT DETAILS	
34301-0000011389 Event Round	Sell RFx Version	2	Submit To:	Health	
1	1		- Cabiiii 101	Call for Shipping Information	
Event Name Pass-Through Autocla	WA .		Contact:	United States Tara Roark	
Start Time	Finish Time		Phone:	615/532-1837	
01/30/2020 08:00:00 0	OST 02/17/2020 14:00:00 (CST	Email:	Tara.Roark@tn.gov	
Event Currency: Bids allowed in other of	US Dollar urrency: No				
Response Comme	ents				
of State's Office, it will be days to become register	egistered with the Secretary egiven seven (7) business ed or the bid will be rejected.				
Required: Yes Mand	y of State issued ID Number datory ResponseNo				
Response Comme					
•					
Associated Terms:	Prior to award and during the contract	ct period, a corp	oration must be	e registered and be in good sta	nding with the
	Secretary of State's Office. The follow	wing is the cont	ract information	for the Secretary of State's Off	fice: State of
	Tennessee, Department of StateAttn 6th Floor, WRS Tennessee TowerNa https://sos.tn.gov/business-services/	n Business Filing ashville TN 3724	gs and Informati 3-1102Email: T	on312 Rosa L Parks Ave NSOS.CORPINFO@tn.govWe	bsite:
	days from the date of bid submission	າ to register with	the Secretary	of State or bid response will be	rejected.
Please enter the number date, after which your bid	of days, from the bid opening doffer will expire:				
Required: Yes Mand	datory ResponseNo				
Response Comme	onte				
Response Comme	शार				
Technical Assistance					
Enter the name, address technician or service rep provided below.	s, and telephone number of the resentative in the space				
List the Technician/Servi List the Technician/Servi List the Technician/Servi Phone Number	hnician/Service Representative ce Representative Address ce Representative Phone Number ce Representative Toll Free ce Representative Pager or				

Address
List the Technician/Service Representative Website

Required: Yes Mandatory Response No

PeopleSoft Strategic Sourcing Event ID Format Туре Page 34301-0000011389 **Event Round** Version **Event Name** Pass-Through Autoclave Finish Time **Start Time** 01/30/2020 08:00:00 CST

02/17/2020 14:00:00 CST

Event Currency: US Dollar Bids allowed in other currency:

Bidder: **PUBLIC EVENT DETAILS**

Submit To: Health

Call for Shipping Information

United States Tara Roark

Contact: Phone: 615/532-1837 Email: Tara.Roark@tn.gov

Response Commo	ents		
_			

Please answer yes or no to the following. If YES, describe using additional pages and attach to the Response including any relevant details:

- (a) is the Respondent presently debarred, suspended, proposed for debarment, or voluntarily excluded from covered transactions by any federal or state department or agency;
- (b) has the Respondent within the past three (3) years, been convicted of, or had a civil judgment rendered against the contracting party from commission of fraud, or a criminal offence in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or grant under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) is the Respondent presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) with commission of any of the offenses detailed above; and
- (d) has the Respondent within a three (3) year period preceding the contract had one or more public transactions (federal, state, or local) terminated for cause or default.

Required: Yes Mandatory Response No

Response Comments

The Respondent affirms the following statement, as required by the Iran Divestment Act Tenn. Code Ann. § 12-12-111: "By submission of this response, each Respondent and each person signing on behalf of any Respondent certifies, and in the case of a joint response each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each Respondent is not on the list created pursuant to Tenn. Code Ann. § 12-12-106." For reference purposes, the list is currently available online at: https://www.tn.gov/generalservices/procurement/centralprocurement-office-cpo-/library-/public-information-li brary.html

Required: Yes Mandatory Response No

PeopleSoft Strategic Sourcing Event ID Format Type Page Bidder: **PUBLIC EVENT DETAILS** 34301-0000011389 **Event Round** Version **Submit To:** Health Call for Shipping Information **Event Name** United States Contact: Tara Roark Pass-Through Autoclave **Finish Time** Phone: 615/532-1837 **Start Time** 01/30/2020 08:00:00 CST 02/17/2020 14:00:00 CST Email: Tara.Roark@tn.gov **Event Currency: US** Dollar Bids allowed in other currency: Response Comments Please complete the attached form, included with the Terms and Conditions document, and attach all pertinent documentation regarding your company's efforts to achieve diversity business participation. This information must be submitted with the bid document and monthly thereafter until a reasonable level of diversity business participation is achieved. Confirm below that you have completed this attached form by choosing, "Yes." Required: Yes Mandatory Response No **Response Comments** Please attach documentation that reflects you are registered with the Department of Revenue for sales and use tax, as stated in the Terms and Conditions. If you are exempt, please provide a copy of the communication from the Department of Revenue supporting this exemption. Required: Yes Mandatory Response No Response Comments Respondent shall list their company's Contact Person. The Contact Person shall be the contact person for all questions regarding the Purchase Order. Note: respondent may attach a list of alternate contact personnel to the bid comments. Please enter the supplier contact person's information for this purchase order: Contact Name Address Phone Number

Required: Yes Mandatory Response No

Toll-Free Number Mobile Phone Number Email Address Website URL

Event ID 34301-0000011389	Format Sell	Type	Page	Bidder:	PUBLIC EVENT DETAILS	
Event Round	Version	RFx	5	Submit To:	Health Call for Shipping Information	
Event Name				•	United States	
Pass-Through Autoc Start Time		inish Time		Contact: Phone:	Tara Roark 615/532-1837	
01/30/2020 08:00:0		2/17/2020 14:00:00) CST	Email:	Tara.Roark@tn.gov	
Event Currency: Bids allowed in othe		Dollar				
Response Com	ments					
The Equipment Press of Mechanical Engine proof that the propose meet ASME standards	ers (ASME) appro ed Instrument is m s.	oved. Please provide nanufactured to				
Required: Yes Ma	andatory Respon	seNo				
Response Com	ments					
Respondent must be Administration (FDA). FDA Registration num	Please provide p	ood and Drug roof as well as				
Required: Yes Ma	andatory Respon	seNo				
Response Com	ments					
We ask that you take this survey. The purpo Respondents' assess Your responses will re bearing or considerati	ose of this survey ments of CPO pro emain anonymous	is to capture ocurement processes. s, and will have no				
https://www.surveymo	onkey.com/r/stated	oftncpocustomer				
Required: No Ma	andatory Respon	seNo				
Response Com	ments					

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01-0000011389 nt Round	Sell Version 1	RFx			6	Submit To:	Health Call for Shipping Info	ormation	
nt Name s-Through Aut	oglavo					Contact:	United States Tara Roark		
t Time		Finish Time				Phone:	615/532-1837		
30/2020 08:00	:00 CST	02/17/2020 14:	00:00	CST		Email:	Tara.Roark@tn.gov		
ent Currency: s allowed in ot	her currency:	US Dollar No							
ine Details									
	ID: 1000188688 Reserve Price: N	Line Qty : lo	1.00	UOM: I	Each			Bid Qty:	1
escription: Loa	ading Rack and Sho	elves, Autoclave							
Question			U	OM	Best	W	orst		Response
What is the unit	price of this item?								
Response Con	nments								
		Line Otv	1.00	UOM∙ I	-ach			Bid Otv	1
ine: 2 Item I	nments ID: 1000188689 Reserve Price: N	Line Qty:	1.00	UOM: E	Each			Bid Qty:	1
ine: 2 Item I equired: Yes F	ID: 1000188689 Reserve Price: N			UOM: E	Each			Bid Qty:	1
ine: 2 Item I equired: Yes F escription: Ste Question	ID: 1000188689 Reserve Price: N eam-Activated Seal	lo	e	UOM: E	Each Best	w	orst	Bid Qty:	1 Response
ine: 2 Item I equired: Yes F escription: Ste Question What is the unit	ID: 1000188689 Reserve Price: N	lo Installation, Autoclave	e			w	orst	Bid Qty:	
ine: 2 Item I equired: Yes F escription: Ste Question What is the unit	ID: 1000188689 Reserve Price: Neam-Activated Seale price of this item? Yes Mandatory F	lo Installation, Autoclave	e			w	orst	Bid Qty:	
ine: 2 Item I equired: Yes F escription: Ste Question What is the unit Required:	ID: 1000188689 Reserve Price: Neam-Activated Seale price of this item? Yes Mandatory F	lo Installation, Autoclave	e			w	orst	Bid Qty:	
ine: 2 Item I equired: Yes F escription: Ste Question What is the unit Required: Response Con	ID: 1000188689 Reserve Price: Neam-Activated Seale price of this item? Yes Mandatory F	Installation, Autoclave Response: No Line Qty:	e		Best	w	orst	Bid Qty:	Response
ine: 2 Item I equired: Yes F escription: Ste Question What is the unit Required: Response Con ine: 3 Item I equired: Yes F escription: Ste	ID: 1000188689 Reserve Price: Neam-Activated Sealet price of this item? Yes Mandatory Formments ID: 1000156696 Reserve Price: N	Line Qty: Hospital and Researd	1.00	OM	Best				Response
ine: 2 Item I equired: Yes F escription: Ste Question What is the unit Required: Response Con ine: 3 Item I equired: Yes F escription: Ste Ga: Question	Reserve Price: Neam-Activated Seal price of this item? Yes Mandatory Formments ID: 1000156696 Reserve Price: Nearlizing Equipment, s, Steam, etc.), Ge	Line Qty: Hospital and Researcheric Asset	1.00 ch: Autoc	OM	Best	rs (Chemical, D			Response
ine: 2 Item I equired: Yes F escription: Ste Question What is the unit Required: Response Con ine: 3 Item I equired: Yes F escription: Ste Ga: Question	ID: 1000188689 Reserve Price: Neam-Activated Sealet price of this item? Yes Mandatory Forments ID: 1000156696 Reserve Price: Nearilizing Equipment,	Line Qty: Hospital and Researcheric Asset	1.00 ch: Autoc	OM UOM: f	Best Each Sterilize	rs (Chemical, D	ry Heat,		Response

301-0000011389 ent Round	Format	Туре	Pa	age	Bidder:	PUBLIC EVENT DETAILS	
ant Round	Sell	RFx		7	Outleast Tax	L L Id-	
in itouria	Version 1				Submit To:	Health Call for Shipping Information	
ent Name						United States	
ss-Through Autocl	ave				Contact:	Tara Roark	
art Time		Finish Time			Phone:	615/532-1837	
/30/2020 08:00:00	CST	02/17/2020 14:0)0:00 CST		Email:	Tara.Roark@tn.gov	
ent Currency: Is allowed in other		US Dollar No					
Required: Yes Rese			1.00 UOM :			Bid Qty	: 1
Description: Electrication	al and Lighting	Installation Service, P	'er Building, Per I	Project, Ge	eneric Asset		
Question			UOM	Best	W	orst	Response
What is the unit pric	e of this item?						
Required: Yes		tesponse. No					
Response Comme							
	1000111010 i rve Price : N	Line Qty:	1.00 UOM :	Each		Bid Qty	: 1
.ine: 5 Item ID: Required: Yes Rese	erve Price: N	lo				Bid Qty	: 1
Line: 5 Item ID: Required: Yes Rese Description: Shipping	erve Price: N	lo used with Asset Purcl			w	Bid Qty	: 1 Response
Line: 5 Item ID: Required: Yes Rese Description: Shipping	erve Price: N	lo used with Asset Purcl	hases, Generic It	tem	w	·	
Line: 5 Item ID: Required: Yes Rese Description: Shipping	erve Price: Ng/Freight to be e of this item?	lo used with Asset Purcl	hases, Generic It	tem	w	·	

PeopleSoft Strategic Sourcing

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Event ID	Format	Туре	Page
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Event Round	Version		
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Event Name			
Pass-Through Autoc	lave		
Start Time		Finish Time	
01/30/2020 08:00:0	0 CST	02/17/2020 14:00:00 CST	

Event Currency: US **Bids allowed in other currency:** No **US** Dollar

Bidder: **PUBLIC EVENT DETAILS**

Submit To:

Contact:

Health
Call for Shipping Information
United States

Tara Roark 615/532-1837 Tara.Roark@tn.gov Phone: Email:

Bidder Informatio

<u>Biadoi iiii Giiiiati Gii</u>		
Firm Name:		
Name:	Signature:	Date:
Phone #:	Fax #:	
Street Address:		
City & State:	Zip Code:	
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Email:		

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Event ID Format Type Page 34301-0000011389 **Event Round** Version **Event Name** Pass-Through Autoclave **Finish Time Start Time** 01/30/2020 08:00:00 CST 02/17/2020 14:00:00 CST

US Dollar **Event Currency:** Bids allowed in other currency: No

Bidder: **PUBLIC EVENT DETAILS**

Submit To: Health

Call for Shipping Information

United States

Contact: Tara Roark 615/532-1837 Phone: Email: Tara.Roark@tn.gov

Appendix A - Line Specifications
Line: 1 | Item ID: | 1000188688 | Line Qty: | 1

UOM: Each

Description: Loading Rack and Shelves, Autoclave

Item Specifications

Manufacturer: Mfg Item ID: Item Length: Item Width:

0 0 Item Volume: Item Weight: Item Size:

Item Height: **Dimension UOM:** Volume UOM: Weight UOM:

Shipping Information

Schedule: Quantity:

Due Date: 02/02/2020

Freight Terms:

Ship Via: Best Option Available Ship To:

Item Color:

LABORATORY SERVICES-NASHVILLE

630 HART LANE

NASHVILLE TN 37216-2006

United States

Line: 2 Item ID: 1000188689 Line Qty: 1 UOM: Each

Description: Steam-Activated Seal Installation, Autoclave

Item Specifications

Manufacturer: Mfg Item ID:

Item Length: 0 Item Width: 0 Item Volume: Item Weight: Item Size:

Item Height: **Dimension UOM:** Volume UOM: Weight UOM: Item Color:

Shipping Information

Schedule: Quantity:

Due Date: 02/02/2020

Freight Terms:

Ship Via:

Best Option Available

Ship To:

LABORATORY SERVICES-NASHVILLE

630 HART LANE

NASHVILLE TN 37216-2006

United States

Item ID: 1000156696 Line Qty: 1 UOM: Each

Description: Sterilizing Equipment, Hospital and Research: Autoclaves and Sterilizers (Chemical, Dry Heat, Gas, Steam, etc.),

Generic Asset

PeopleSoft Strategic Sourcing

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Event ID	Format	Type	Page
34301-0000011389	Sell	RFx	10
Event Round	Version		
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01/30/2020 08:00:0	0 CST	02/17/2020 14:00:00 CST	

Event Currency: US Dollar

Bids allowed in other currency: No

Bidder: **PUBLIC EVENT DETAILS**

Submit To: Health

Call for Shipping Information

United States Tara Roark

Contact: 615/532-1837 Phone: Email: Tara.Roark@tn.gov

Item Specifications

Manufacturer: Mfg Item ID:

Item Length: 0 Item Width: 0 **Item Volume:** 0 Item Weight: Item Size:

Item Height: **Dimension UOM:** Volume UOM: Weight UOM: Item Color:

Shipping Information

Schedule:

Quantity: 02/02/2020

Due Date: Freight Terms:

Ship Via: Best Option Available Ship To: LABORATORY SERVICES-NASHVILLE

630 HART LANE

NASHVILLE TN 37216-2006

United States

Item ID: 1000173532 Line Qty: UOM: Each Line: 4 1

Electrical and Lighting Installation Service, Per Building, Per Project, Generic Asset

Item Specifications

Manufacturer: Mfg Item ID:

Item Length: 0 Item Width: 0 **Item Volume:** 0 Item Weight: Item Size:

Item Height: **Dimension UOM:** Volume UOM: Weight UOM: Item Color:

Shipping Information

Schedule:

Quantity:

Due Date: 02/02/2020

Freight Terms:

Ship Via: Best Option Available Ship To:

LABORATORY SERVICES-NASHVILLE

630 HART LANE

NASHVILLE TN 37216-2006

United States

Item ID: 1000111010 Line Qty: 1 UOM: Each Description: Shipping/Freight to be used with Asset Purchases, Generic Item

Item Specifications

Manufacturer: Mfg Item ID:

Item Length: 0 Item Height: Dimension UOM: Item Width: 0 Item Volume: Volume UOM: Item Weight: Weight UOM: Item Size: Item Color:

PeopleSoft Strategic Sourcing

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Event ID	Format	Туре	Page
34301-0000011389	Sell	RFx	11
Event Round	Version		
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Event Name			
Pass-Through Autoc	lave		
Start Time		Finish Time	
01/30/2020 08:00:0	0 CST	02/17/2020 14:00:00 CST	

Event Currency: US **Bids allowed in other currency:** No **US** Dollar

Bidder: **PUBLIC EVENT DETAILS**

Submit To:

Health
Call for Shipping Information
United States

Tara Roark

Contact: Phone: 615/532-1837 Tara.Roark@tn.gov Email:

Shipping Information

Schedule: Ship To: LABORATORY SERVICES-NASHVILLE

Quantity: 630 HART LANE

Due Date: 02/02/2020 NASHVILLE TN 37216-2006

Freight Terms: **United States**

Ship Via: Best Option Available

PeopleSoft Strategic Sourcing

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Event ID	Format	Туре	Page
34301-0000011389	Sell	RFx	12
Event Round	Version		
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Event Name			
Pass-Through Autoc	lave		
Start Time		Finish Time	
01/30/2020 08:00:0	0 CST	02/17/2020 14:00:00 CST	

Event Currency: US Dollar **Bids allowed in other currency:** No

Bidder: PUBLIC EVENT DETAILS

Submit To: Health

Contact:

Call for Shipping Information

United States Tara Roark

Phone: 615/532-1837 Email: Tara.Roark@tn.gov

Appendix B - Terms & Conditions

- The undersigned acknowledges that all submitted information and documentation will become the property of the state of Tennessee. The undersigned also affirms that the information given above is true, accurate, and includes pertinent information necessary to identify and explain the operation of this organization to the best of my knowledge and is in no way misleading.
- 2. Should any data change in the future, the Supplier agrees to immediately submit the correct information electronically through the State's Supplier Portal.

If the information will be submitted in writing please mail to the following address:

Department of Finance and Administration 312 Rosa L. Parks Ave. 21st Floor Tennessee Tower ATTN: Supplier Maintenance Nashville, TN 37243

3. No person on the grounds of handicap or disability, age, race, color, religion, sex, national origin, creed, or any other classification protected by Federal and/or Tennessee State constitutional and/or statutory law shall be excluded from participation in, or denied benefits of, or be otherwise subjected to discrimination in the performance of the Contract or in the employment practices of the Contractor. The Contractor shall, upon request, show proof of such non-discrimination, and shall post in conspicuous places, available to employees and applicants, notices of non-discrimination.

Last Updated: 08/30/2016